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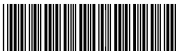
| APPLICATION NO.  | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|--|-------------|----------------------|---------------------|------------------|
| 10/509,055   | 09/24/2004  | Hiroaki Sagawa       | 1422-0644PUS1       | 9947             |
| 2292 7590 05/08/2008<br>BIRCH STEWART KOLASCH & BIRCH<br>PO BOX 747<br>FALLS CHURCH, VA 22040-0747 |             |                      |                     |                  |
| EXAMINER<br>JUDES, AMYE  |             |                      |                     |                  |
| ART UNIT   |             | PAPER NUMBER         |                     |                  |
| 1644   |             |                      |                     |                  |
| NOTIFICATION DATE  |             | DELIVERY MODE        |                     |                  |
| 05/08/2008   |             | ELECTRONIC           |                     |                  |

**Please find below and/or attached an Office communication concerning this application or proceeding.**

The time period for reply, if any, is set in the attached communication.


Notice of the Office communication was sent electronically on above-indicated "Notification Date" to the following e-mail address(es):

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|   |  |   |
|---|--|---|
| <b>Index of Claims</b><br><br> | <b>Application/Control No.</b><br><br>10509055 | <b>Applicant(s)/Patent Under Reexamination</b><br><br>SAGAWA ET AL. |
|   | <b>Examiner</b><br><br>AMY E JUEDES            | <b>Art Unit</b><br><br>1644   |

|   |                 |   |                   |   |                     |   |                 |
|---|-----------------|---|-------------------|---|---------------------|---|-----------------|
| ✓ | <b>Rejected</b> | - | <b>Cancelled</b>  | N | <b>Non-Elected</b>  | A | <b>Appeal</b>   |
| = | <b>Allowed</b>  | ÷ | <b>Restricted</b> | I | <b>Interference</b> | O | <b>Objected</b> |

| <input type="checkbox"/> Claims renumbered in the same order as presented by applicant |          |            | <input type="checkbox"/> CPA |  |  | <input type="checkbox"/> T.D. |  |  | <input type="checkbox"/> R.1.47 |  |  |  |
|--|----------|------------|------------------------------|--|--|-------------------------------|--|--|---------------------------------|--|--|--|
| CLAIM  |          |            | DATE                         |  |  |                               |  |  |                                 |  |  |  |
| Final  | Original | 04/28/2008 |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 1        | ✓          |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 2        | ✓          |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 3        | ✓          |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 4        | ✓          |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 5        | ✓          |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 6        | ✓          |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 7        | ✓          |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 8        | N          |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 9        | -          |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 10       | ✓          |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 11       | -          |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 12       | ✓          |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 13       | -          |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 14       | N          |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 15       | N          |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 16       | N          |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 17       | N          |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 18       | N          |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 19       | N          |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 20       | N          |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 21       | N          |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 22       | N          |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 23       | N          |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 24       | N          |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 25       | N          |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 26       | N          |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 27       | N          |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 28       | ✓          |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 29       | ✓          |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 30       | ✓          |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 31       | ✓          |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 32       | ✓          |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 33       | ✓          |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 34       | ✓          |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 35       | ✓          |                              |  |  |                               |  |  |                                 |  |  |  |
|  | 36       | ✓          |                              |  |  |                               |  |  |                                 |  |  |  |

|   |  |   |
|---|--|---|
| <p align="center"><b><i>Index of Claims</i></b></p>  | <b>Application/Control No.</b><br>10509055 | <b>Applicant(s)/Patent Under Reexamination</b><br>SAGAWA ET AL. |
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